MICHAEL P. HEIN County Executive

CAROL M. SMITH, MD, MPH

Commissioner of Health

Dear Migrant Farm Worker Housing Owner/Operator:

Enclosed is an application for a permit to operate Migrant Farm Worker Housing in Ulster County for the period **beginning**January 1 and ending December 31. This application and the appropriate fee(s) must be submitted at least 30 days before the first day of operation. Please be advised that operating without a valid permit is a violation of Part 15 of the New York State Sanitary Code and may subject you to an administrative enforcement action and may result in closure. Also, it is the responsibility of the owner and/or operator of Migrant Farm Worker Housing to notify the Ulster County Department of Health in writing of any changes in the status of the operation of your establishment (e.g. closing, change of ownership, etc.). Migrant Farm Worker Housing permits are not transferable.

The following <u>must</u> be completed and returned in order for your application to be processed. The application <u>cannot be processed</u> if <u>any</u> of the required information below is missing or incomplete. If you have any questions regarding the enclosed application, please call James T. Rodden at (845) 340-3021.

☐ Complete the enclosed application and sign and print your name on page four
\square Expected opening and closing dates must be completed on the application
□□ Enclose copies of *Workers' Compensation and Disability forms or signed CE-200 Exemption form *New York State Law requires every facility to have workers' compensation and disability insurance or to have a CE-200 Exemption form from the New York State Workers' Compensation Board. See page 4 of the application and the enclosure for instructions and the forms that must be submitted.
□□ Call this office as soon as possible to schedule an appointment for a pre-season inspection. A permit is required prior to occupying any portion of the farm worker housing.
□□ Nitrate samples are required to be taken on a yearly basis. Enclosed is a list of laboratories that provide this service. Please try to take this sample prior to operating.
☐ Enclose appropriate payment of fee(s) by check or money order payable to: <u>Ulster County Commissioner of Finance</u>
ALL APPLICATION/PERMIT FEES ARE NON-REFUNDABLE

Migrant Farm Worker Housing Fee Schedule

5– 9 Occupants	\$100.00
10 - 25 Occupants	\$150.00
26+ Occupants	\$200.00

Water Sample (when required)......\$ 40.00 Returned check fee\$ 20.00

Return all of the above to:

Ulster County Department of Health Environmental Health Services Division 239 Golden Hill Lane Kingston, New York 12401